The Quest for Precision Medicine: A Metabolic Approach

Demystifying Medicine March 6, 2018 Phillip Gorden, M.D.





Concept of a Disease "Cure"

- Penicillin Pneumococcal pneumonia
- Vaccines Eradication of polio in the US, and smallpox in the world
- Duodenal Ulcer H2 blockers and proton pump inhibitors (excellent treatment, but do they treat the etiologic basis of the disease?)

No – specific treatment of H. Pylori actually eradicates the cause of the disease

Discovery of Etiologic or Pathophysiologic Basis of Metabolic Diseases

Etiologic Basis of Conditions

Hypertension

Dyslipidemia

Diabetes

Known roughly 10-15%.

Thus therapy is largely nonspecific.

Diabetes – A Metabolic Disease

Classifications:

- Type 1 (β-cell destruction, usually leading to absolute insulin deficiency), 5-10%
- Type 2, (Insulin resistance with relative insulin deficiency), 90-95%
- Other Specific Types
- Gestational

Insulin Resistance Spectrum

Least Severe

Most Severe

Common forms

Metabolic Syndrome

- Polycystic OvarianSyndrome
- Type 2 Diabetes

Syndromic Forms

- Lipodystrophy
- Insulin Receptor Mutations
- Type B insulin resistance

Lipodystrophy Syndromes

 Heterogeneous group of disorders characterized by selective loss of adipose tissue

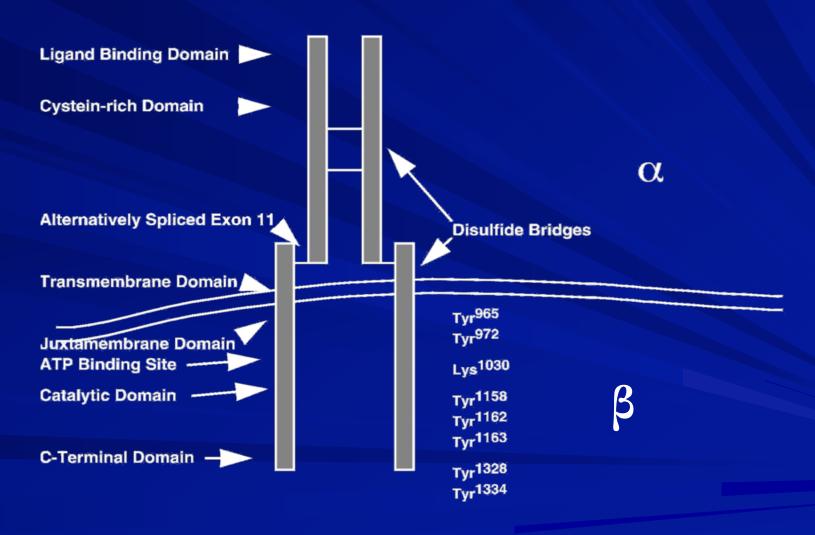




The Insulin Receptoropathy

- Acquired
 - Autoantibodies to the insulin receptor
- Genetic
 - Mutations of the insulin receptor

Insulin Receptor Structure



J Clin Endocrinol Metab. 2001 Mar;86(3):972-9

The Clinical Challenge

Three Stories:

Development of new technology.

New use of existing technology.

Combinations of the old and the new.

The Clinical Challenge

Three Stories:

Development of new technology.

New use of existing technology.

Combinations of the old and the new.

Lipodystrophy Syndromes

- Paucity of fat
- Deficiency of adipocyte hormones (e.g. leptin)
- Insulin resistance
- Hypertriglyceridemia
- Fatty infiltration of liver and other tissues



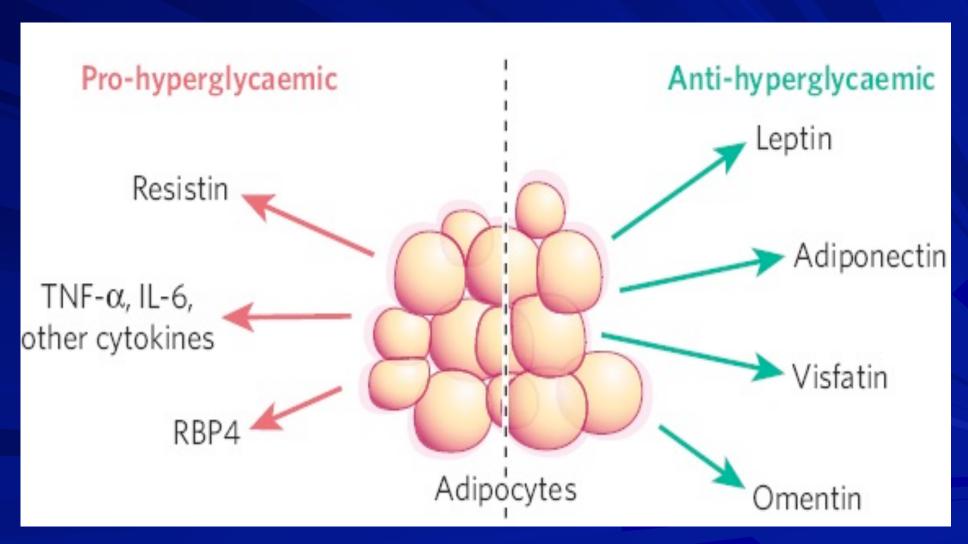
This story begins with an obese mouse...



Leptin

- Leptin is the major hormone regulating energy balance
- Plasma leptin concentration is a function of adiposity.
- In obesity plasma leptin is elevated and leptin administration has little effect in regulating energy intake.

Adipose Tissue as an Endocrine Organ and Regulators of Glucose Homeostasis



Leptin: From Hormone to Major Pharmaceutical

Leptin: Of Mice and Man





3-year-old weighing 42 kg



7-year-old weighing 32 kg

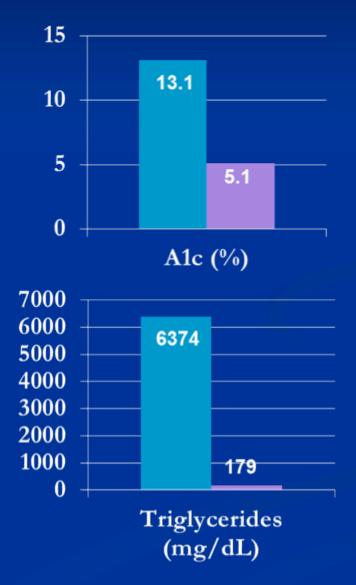
Before Replacement

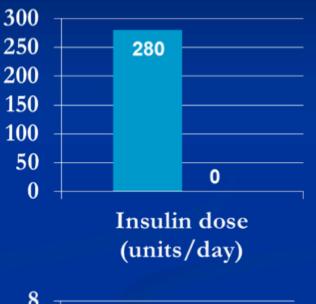
After Replacement

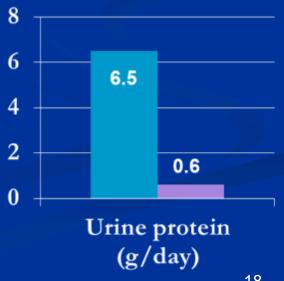
Farooqi S. NEJM, September 1999

Dramatic Effects of Leptin

- 21 year old woman with generalized lipodystrophy
- **Poorly** controlled diabetes with h/o DKA
- Severe hypertriglyceridemia
- Nephrotic range proteinuria







Before Leptin



1 year on Leptin



FDA review

- Based on the NIH data, metreleptin was approved for patients with generalized lipodystrophy, with or without metabolic complications
- Not approved for partial lipodystrophy, regardless of metabolic disease

--INDICATIONS AND USAGE---

MYALEPT is a leptin analog indicated as an adjunct to diet as replacement therapy to treat the complications of leptin deficiency in patients with congenital or acquired generalized lipodystrophy. (1)

Limitations of Use

- The safety and effectiveness of MYALEPT for the treatment of complications of partial lipodystrophy have not been established. (1)
- The safety and effectiveness of MYALEPT for the treatment of liver disease, including nonalcoholic steatohepatitis (NASH), have not been established. (1)
- MYALEPT is not indicated for use in patients with HIV-related lipodystrophy. (1)
- MYALEPT is not indicated for use in patients with metabolic disease, without concurrent evidence of generalized lipodystrophy. (1)

The Clinical Challenge

Three Stories:

Development of new technology.

New use of existing technology.

Combinations of the old and the new.

The patient

- 21 year old African American female
- Average Fasting blood glucose: 371 mg/dL
- Extreme weight loss
- Massive polyuria (Up to 15 liters urine/day)
- Acanthosis nigricans
- Extreme insulin resistance



Strategy of Therapeutic Approach

- Goal: elimination of the autoantibody
- Rituximab: antibody against CD-20, a cell surface molecule expressed by B-cells
- High dose pulsed steroids: to reduce preexisting antibody-producing plasma cells
- Non-specific T-cell directed immunosuppression
 - Cyclophosphamide
 - Cyclosporine

Our Type B Insulin resistance patient after treatment



The Clinical Challenge

Three Stories:

Development of new technology.

New use of existing technology.

Combinations of the old and the new.

Patient

- 12 year old Korean male
- At age 8 months of age presented with:
 - Extreme Hyperinsulinemia
 - Acanthosis nigricans
 - Increased body hair
 - Abnormal dentition

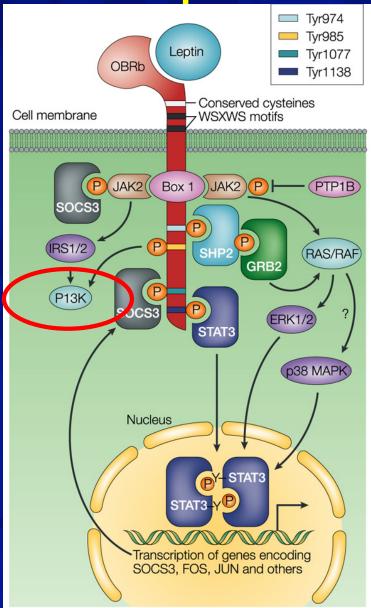


 At age 9 years old → Diabetes → A1c 11.8%

Insulin

Insulin **Insulin Receptor** Ras PI 3-Kinase Grb2 Raf-1 IRS PIP_3 "Ras-MAPK MEK Pathway" Akt MAPK p90^{RSX} **Cell Growth** Some Gene Differentiation Expression **Anti-Apoptosis** Gluconeogenesis Courtesy of C. Ronald Kahn

Leptin



Insulin Resistance Spectrum

Least Severe

Most Severe

Common forms

Metabolic Syndrome

- Polycystic OvarianSyndrome
- Type 2 Diabetes

Syndromic Forms

- Lipodystrophy
- Insulin Receptor Mutations
- Type B insulin resistance